

R430-90-11, R430-50-11. SUPERVISION AND RATIOS.

Licensed Family 90-11:

- (1) The licensee or a substitute shall be physically present on-site and provide care and direct supervision of each child at all times, both indoors and outdoors. Direct care and supervision of each child includes:
- (a) awareness of and responsibility for each child in care, including being near enough to intervene if needed; and

Residential Certificate 50-11:

- (1) The certificate holder or a substitute shall be physically present on-site and provide care and direct supervision of each child at all times, both indoors and outdoors. Direct care and supervision of each child includes:
- (a) awareness of and responsibility for each child in care, including being near enough to intervene if needed; and

Rationale / Explanation

Supervision of children is basic to the prevention of harm. Parents have an expectation that their children will be supervised when in the care of the licensee/certificate holder. To be available for supervision as well as rescue in an emergency, a caregiver must be able to see and hear the children. Providers should regularly assess the environment to see how their ability to see and hear children during activities might be improved. Many instances have been reported in which a child was hidden when the group was moving to another location, or a child wandered off when a door was open. Regular counting of children can alert the provider to a missing child.
CFOC, pgs. 58-59 Standard 2.028

Enforcement

Providers will be considered to be in compliance with this rule if:

- A. *The provider is inside when children are inside, and outside when children are outside, except for the outside provision for school age children only found in rule #2 below. And,*
- B. *If the provider and children are inside, the provider will be considered in compliance if she or he is on the same floor of the house as the children, can hear the children (including with an audio monitor), and visually checks on them at least once every 15 minutes. By state fire code, an area of a home is considered a separate "floor" or "level" if it is 10 stairs or more to the area. School age children only may play on a different floor of the home than the provider is on, if the provider can hear the children (including with an audio monitor) and visually checks on them every 15 minutes.*
- C. *When indoors with the children, the provider may temporarily (for 5 minutes or less) be on a different floor or level of the home from the children, and/or not within hearing distance of the children, for activities such as:*
 - i. *Bathroom breaks*
 - ii. *Checking on sleeping children*
 - iii. *Bringing prepared food from the kitchen to the eating area*
 - iv. *Changing diapers*
 - v. *First-aid application*
 - vi. *Necessary child-related clean-ups*
 - vii. *Laundry*
 - viii. *Removing snow from an outdoor entryway or exit.*
- D. *During nap time sleeping children may be on a different floor or level of the home from the provider, if:*

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- i. The provider can hear the sleeping children (either by being close enough to the children, or by using an audio monitor). And,
 - ii. The provider visually checks on the sleeping children age 1 and older at least every 30 minutes, and monitors sleeping infants as required in 1(b) below.
- E. The following are examples of activities the provider may not engage in at any time while children are in care.
 - i. Taking a shower or bath.
 - ii. Napping, including when the children are napping.
 - iii. Any outdoor activity, if any children (awake or asleep) are indoors.

If children are unsupervised during an off-site activity, cite R430-20(3)(c), not this rule.

Level 1B Noncompliance: if the licensee/certificate holder or substitute is off-site while children are in care.

Level 2B Noncompliance otherwise.

Licensed Family 90-11:

- (1) The licensee or a substitute shall be physically present on-site and provide care and direct supervision of each child at all times, both indoors and outdoors. Direct care and supervision of each child includes:
 - (b) monitoring of each sleeping infant in one of the following ways:
 - (i) by placing each infant for sleep in a location where the infant is within sight and hearing of a provider;
 - (ii) by in person observation of each sleeping infant at least once every 15 minutes; or
 - (iii) by using a Department-approved infant sleep monitoring device.

Residential Certificate 50-11:

- (1) The certificate holder or a substitute shall be physically present on-site and provide care and direct supervision of each child at all times, both indoors and outdoors. Direct care and supervision of each child includes:
 - (b) monitoring of each sleeping infant in one of the following ways:
 - (i) by placing each infant for sleep in a location where the infant is within sight and hearing of a provider;
 - (ii) by in person observation of each sleeping infant at least once every 15 minutes; or
 - (iii) by using a Department-approved infant sleep monitoring device.

Rationale / Explanation

Supervision of children is basic to the prevention of harm. Parents have an expectation that their children will be supervised when in the care of the licensee/certificate holder. To be available for supervision as well as rescue in an emergency, a caregiver must be able to see and hear the children. Providers should regularly assess the environment to see how their ability to see and hear children during activities might be improved. Many instances have been reported in which a child was hidden when the group was moving to another location, or a child wandered off when a door was open. Regular counting of children can alert the provider to a missing child. CFOC, pgs. 58-59 Standard 2.028

Enforcement

The following are examples of activities the provider may not engage in at any time while children are in care.

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- i. Taking a shower or bath.
- ii. Napping, including when the children are napping.
- iii. Any outdoor activity, if any children (awake or asleep) are indoors.

Level 2B Noncompliance.

Licensed Family 90-11, and Residential Certificate 50-11:

- (2) A provider shall actively supervise each child during outdoor play to minimize the risk of injury to a child. A provider may allow only school age children to play outdoors while the provider is indoors, if:
- (a) a provider can hear the children playing outdoors; and
 - (b) the children playing outdoors are in an area completely enclosed within a 4 foot high fence or wall, or a solid natural barrier that is at least 4 feet high.

Rationale / Explanation

Children like to test their skills and abilities. This is particularly true in outdoor play with playground equipment. Even if the highest safety standards for playground layout, equipment, and surfacing are met, serious injuries can still happen if children are left unsupervised. CFOC, pgs. 58-59 Standard 2.028

Enforcement

Actively supervising children means the caregivers' attention should be focused on the children at all times, and not on personal interests (such as visiting with other caregivers, talking on a cell phone, text messaging, reading, etc.) or non-caregiving duties. Caregivers should also maintain awareness of the entire group even when interacting with small groups or individual children, and position themselves so that all children playing outdoors can be observed by a caregiver.

Children age three or older may be sent indoors to use the bathroom without the caregiver, but only one child at a time may be sent.

If the outdoor play area is completely fenced, providers will not be considered out of compliance with this rule if the children are outdoors and the provider very briefly (for 5 minutes or less) goes indoors for the following reasons only:

- 1. To help a child use the bathroom when the child is young enough that they need help in the bathroom.
- 2. To administer first aid to an injured child.

Level 1B Noncompliance: if the licensee/certificate holder or substitute is off-site and there are children in care.

Level 2B Noncompliance otherwise.

Licensed Family 90-11:

- (3) The licensee may permit a child to participate in supervised out of the home activities without the licensee if:
- (a) the licensee has prior written permission from the child's parent for the child's participation; and

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Residential Certificate 50-11:

- (3) The certificate holder may permit a child to participate in supervised out of the home activities without the certificate holder if:
- (a) the certificate holder has prior written permission from the child's parent for the child's participation; and

Rationale / Explanation

Supervision of children is basic to the prevention of harm. Parents have an expectation that their children will be supervised when in the care, and that the licensee/certificate holder will not allow their child to go off site without the parent's knowledge and consent. CFOC, pgs. 58-59 Standard 2.028

Enforcement

Examples of supervised out of the home activities include music or dance lessons and playing at a friend's house.

Level 3D Noncompliance: if the provider takes all of the children to an unlicensed home and leaves the children.

Level 4 Noncompliance otherwise.

Licensed Family 90-11:

- (3) The licensee may permit a child to participate in supervised out of the home activities without the licensee if:
- (b) the licensee has clearly assigned the responsibility for the child's whereabouts and supervision to a responsible adult who accepts responsibility for the care and supervision of the child throughout the period of the out of home activity.

Residential Certificate 50-11:

- (3) The certificate holder may permit a child to participate in supervised out of the home activities without the certificate holder if:
- (b) the certificate holder has clearly assigned the responsibility for the child's whereabouts and supervision to a responsible adult who accepts responsibility for the care and supervision of the child throughout the period of the out of home activity.

Rationale / Explanation

Supervision of children is basic to the prevention of harm. Parents have an expectation that their children will be supervised when in the care, and that the licensee/certificate holder will not allow their child to go off site without the parent's knowledge and consent. CFOC, pgs. 58-59 Standard 2.028

Enforcement

Examples of supervised out of the home activities include music or dance lessons and playing at a friend's house.

Level 3D Noncompliance: if the provider takes all of the children to an unlicensed home and leaves the children.

Level 4 Noncompliance otherwise.

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Licensed Family 90-11:

- (4) The maximum allowed capacity for a licensed family child care facility is 16 children, including providers' own children under age four.
- (6) There shall be no more than four children under the age of two in care with two providers; and no more than two children under the age of two in care with one provider, except that if there are six or fewer children in care, there may be up to three children under the age of two in care.

Residential Certificate 50-11:

- (4) The maximum allowed number of children in care at any one time is eight children, including no more than two children under the age of two. The number of children in care includes the providers' own children under the age of four.

Rationale / Explanation

The purpose of this rule is to ensure children's safety, especially in the event of a fire or other emergency evacuation. The National Fire Protection Association in its life safety code recommends that in large family child care homes two staff care for up to 12 children only. CFOC pgs. 3-4 Standard 1.002

Enforcement:

Level 2B Noncompliance:

- *If the provider is over capacity by 5 or more children, and there are not more than 2 children under age 2 in care.*
- *If the provider is over capacity by any amount, and has more than 2 children under age 2 in care.*
- *If the provider is not over capacity, but has 4 or more children under the age of 2 in care.*

Level 3D Noncompliance:

- *If the provider is over capacity by up to 4 children, and there are not more than 2 children under age 2 in care.*
- *If the provider is not over capacity, but has 3 children under the age of 2 in care and 4 children over the age of 2 in care.*

Licensed Family 90-11:

- (5) The licensee shall maintain a provider to child ratio of one provider for up to eight children in care, and two providers for nine to sixteen children in care.
 - (a) Children in care include the providers' own children under the age of four.
 - (b) Providers who are included in the provider to child ratio must meet all of the requirements of this rule.

Rationale / Explanation

The purpose of required caregiver to child ratios is to ensure that there are enough caregivers to adequately supervise children, ensure children's safety, and meet children's needs. Low caregiver to child ratios are most critical for infants and toddlers. Infant development and caregiving quality both improve when groups sizes and caregiver to child ratios are smaller. For 3- and 4-year-old children, the size of the group is even more important than ratios. Recommended ratios and group sizes for 3- and 4-year-olds allow these children to have the needed adult support and guidance while encouraging independent, self-initiated play and other activities. CFOC, pgs. 3-5 Standard 1.002

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It is also important for caregiver to child ratios to be sufficiently low to keep caregiver stress below levels that could result in anger with children. Caring for too many children increases the possibility of stress for caregivers, and may result in loss of self-control. CFOC, pgs. 3 Standard 1.001

The American Academy of Pediatrics and the American Public Health Association recommend the following maximum caregiver to child ratios and group sizes. CFOC, pgs. 3 Standard 1.001

1:6 if all children are over the age of two. 1:4 with one child under age two. If the provider has two children under the age of two, then no children under the age of two.

Enforcement

Providers may exceed the required caregiver to child ratios for up to 30 minutes when circumstances beyond the provider's control temporarily prevent the provider from meeting the required ratios. In such emergency situations. Examples of circumstances beyond the provider's control include caregivers not arriving for work at their scheduled time without giving adequate notice, or children arriving earlier than their normal time or departing later than their normal time.

If a provider is out of ratio due to circumstances beyond their control, the licenser may make up to 2 additional unannounced follow-up visits at the same time of day, to determine if the situation was an isolated incident or a recurring pattern. Such follow-up visits shall be made at least a week after the date of the original incident. If two of the three times the provider is within ratio, the situation will be considered an isolated incident. If two of the three times the provider is out of ratio, the situation will be considered a recurring pattern.

If the provider does not maintain required caregiver to child ratios during an off-site activity, cite R430-90-20(3)(c), not this rule.

Level 2B Noncompliance:

- If a single provider is over ratio by 5 or more children, and there are not more than 2 children under age 2 in care.*
- If two providers are over ratio by 9 or more children, and there are not more than 4 children under age 2 in care.*
- If one provider is over ratio by any amount, and has more than 2 children under age 2 in care.*
- If two providers are over ratio by any amount, and have more than 4 children under age 4 in care.*
- If one provider is not over ratio, but has 4 or more children under the age of 2 in care.*
- If two providers are not over ratio, but have 8 or more children under the age of 2 in care.*

Level 3D Noncompliance:

- If a single provider is over ratio by up to 4 children, and there are not more than 2 children under age 2 in care.*
- If two providers are over ratio by up to 8 children, and there are not more than 4 children under age 2 in care.*
- If one provider is not over ratio, but has 3 children under the age of 2 in care and 4 children over the age of 2 in care.*
- If two providers are not over ratio, but have 5 -7 children under the age of 2 in care.*

Licensed Family 90-11:

(7) The total number of children in care may be further limited based on square footage, as found in

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Subsections R430-90-4(7) through (9).

Residential Certificate 50-11:

- (5) The total number of children in care may be further limited based on square footage, as found in Subsection R430-50-4(7) through (9).**

Rationale / Explanation

The purpose of required caregiver to child ratios is to ensure that there are enough caregivers to adequately supervise children, ensure children's safety, and meet children's needs. Low caregiver to child ratios are most critical for infants and toddlers. Infant development and caregiving quality both improve when groups sizes and caregiver to child ratios are smaller. For 3- and 4-year-old children, the size of the group is even more important than ratios. Recommended ratios and group sizes for 3- and 4-year-olds allow these children to have the needed adult support and guidance while encouraging independent, self-initiated play and other activities. CFOC, pgs. 3-5 Standard 1.002

It is also important for caregiver to child ratios to be sufficiently low to keep caregiver stress below levels that could result in anger with children. Caring for too many children increases the possibility of stress for caregivers, and may result in loss of self-control. CFOC, pgs. 3 Standard 1.001

The American Academy of Pediatrics and the American Public Health Association recommend the following maximum caregiver to child ratios and group sizes. CFOC, pgs. 3 Standard 1.001

Licensed Family 90-11:

- (8) The licensee shall not exceed the maximum group sizes found in Table 1 and Table 2.**

Rationale / Explanation

The purpose of required group sizes is to ensure that there are enough caregivers to adequately supervise children, ensure children's safety, and meet children's needs. Infant development and caregiving quality both improve when groups sizes and caregiver to child ratios are smaller. For 3- and 4-year-old children, the size of the group is even more important than ratios. Recommended ratios and group sizes for 3- and 4-year-olds allow these children to have the needed adult support and guidance while encouraging independent, self-initiated play and other activities. CFOC, pgs. 3-5 Standard 1.002

It is also important for caregiver to child ratios and group sizes to be sufficiently low to keep caregiver stress below levels that could result in anger with children. Caring for too many children increases the possibility of stress for caregivers, and may result in loss of self-control. CFOC, pgs. 3 Standard 1.001

The American Academy of Pediatrics and the American Public Health Association recommend the following maximum caregiver to child ratios and group sizes. CFOC, pgs. 3 Standard 1.001

1:6 if all children are over the age of two. 1:4 with one child under age two. If the provider has two children under the age of two, then no children under the age of two.

Enforcement

If the provider does not maintain required group sizes during an off-site activity, cite R430-90-20(3)(c), not this

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rule.

Level 3D Noncompliance if:

- *If one provider is over groups size by up to 3 children.*
- *If two providers are over group size by up to 6 children.*

Level 2B Noncompliance otherwise.

**TABLE 1
MAXIMUM GROUP SIZE WITH 1 CAREGIVER**

# of Providers' Related Children Ages 4-12 Present in the Home During Child Care Hours	Maximum Allowed Number of Children in Care, Including the Providers' Children Under Age 4	Total # of All Children Through Age 12 Present in the Home During Child Care Hours
0 - 4	8 children	12
5	7 children	12
6	6 children	12
7	5 children	12
8	4 children	12
9	3 children	12
10	2 children	12
11	1 child	10

**TABLE 2
MAXIMUM GROUP SIZE WITH 2 CAREGIVERS**

# of Providers' Related Children Ages 4-12 Present in the Home During Child Care Hours	Maximum Allowed Number of Children in Care, Including the Providers' Children Under Age 4	Total # of All Children Through Age 12 Present in the Home During Child Care Hours
0 - 8	16 children	24
9	15 children	24
10	14 children	24
11	13 children	24
12	12 children	24
13	11 children	24
14	10 children	24
15	9 children	24
16	8 children	24
17	7 children	24
18	6 children	24
19	5 children	24
20	4 children	24
21	3 children	24
22	2 children	24

TABLE 2 MAXIMUM GROUP SIZE WITH 2 CAREGIVERS		
# of Providers' Related Children Ages 4-12 Present in the Home During Child Care Hours	Maximum Allowed Number of Children in Care, Including the Providers' Children Under Age 4	Total # of All Children Through Age 12 Present in the Home During Child Care Hours
23	1 child	24